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PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F77350

1. Corporation Name

MO-MA MARKET CORP.

Principal Place of Business

2300 CORAL WAY
#200
MIAMI FL 33145
US

Mailing Address

2300 CORAL WAY
#200
MIAMI FL 33145
US

2. Principal Place of Business

21 2300 CORAL WAY

Suite, Apt. #, etc.

22 SUITE # 200

City & State

23 MIAMI FLORIDA

Zip Country

24 33145 25 U.S.

2a. Mailing Address

26 2300 CORAL WAY

Suite, Apt. #, etc.

27 SUITE # 200

City & State

28 MIAMI FLORIDA

Zip Country

29 33145 30 U.S.

9. Name and Address of Current Registered Agent

FLORIDA ANNUAL REPORT SERVICES INC
2300 CORAL WAY
#200
MIAMI FL 33145

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits the statement for the purpose of changing its registered office or registered agent, in both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed, printed name of registered agent and the name of the

AMADA CANTERA LOPEZ.PRES

(Print Name of Agent, if not a corporation)

12. OFFICERS AND DIRECTORS

TITLE PD [DELETE]

NAME FRANCO, MANUEL

STREET ADDRESS 2525 NE 2ND AVE

CITY-STATE-ZIP MIAMI FL

TITLE [DELETE]

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE [DELETE]

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE [DELETE]

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE [DELETE]

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE [DELETE]

NAME

STREET ADDRESS

CITY-STATE-ZIP

13.

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment which appears with all other like empowered

SIGNATURE:

MANUEL FRANCO

APPROVED
AND
FILED

99 APR -9 AM 10:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/22/1982

4. FEI Number

59-2179142

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. Does corporation own the current year intangible
Personal Property Tax

[Yes] [No]

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

[Change] [Addition]

500002836945-013
-04/12/99--01138--013
****150.00 ****150.00

3/27/99

3/27/99

0217605

CR2E034 (11/99)